PTO/SB/17 (07-06)
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Effec		Complete if Known					
Fees pursuant to the Consoli). Application N	Application Number 10/812,587-Conf. #2626					
FEE TR	Filing Date		March 29, 2004				
Foi	First Named		Daniele PRESSATO				
r - 1	Examiner Nar	Examiner Name L. C. Maier					
Applicant claims sm	Art Unit						
TOTAL AMOUNT OF PA	Attorney Dock	Attorney Docket No. 2039-0124PUS2					
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARC	H, AND EXAM	INATION FEES					***
			EARCH FEES		NATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$) Fee	Small Entit (\$) Fee (\$)	Υ <u>Fee (\$)</u>	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150 50		200	100		
Design	200	100 10	0 50	130	65		, , , , , , , , , , , , , , , , , , , ,
Plant	200	100 30	0 150	160	80		
Reissue	300	150 50	250	600	300		
Provisional	200	100	0	0	0		
2. EXCESS CLAIM FEES							Small Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims	S					360	180
			Paid (\$)	\$) Multiple Dependent Claims			
24 - 24 =	<u>0</u> x	=	0	<u>Fe</u>	Fee (\$) <u>F</u>		!
HP = highest number of total cl Indep. Claims Extra			D-1-176)				_
2 -3=	O x	ee (\$)	Paid (\$) 0				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = /50 (round up to a whole number) x =							
Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00							
SUBMITTED BY							
ignature // S	VIC T	47.604	Registration No. (Attorney/Agent)	30,330	Telephone	(858) 792	-8855
lame (Print Type) Leonard R Svensson Date February 28, 2007							
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